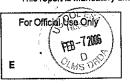
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

. File Numl	nber U- 03223					rear Covered From:			
				3	Į	1 / 1 / 2	005 Through:	12 / 31	/ 2005
3. Name and address of person filing.			4. Name, file number, and address of labor organization.						
Name M=	arshall	JAld	lridae		Name	BCTGM Interna	tional Unic	on Local 35	9-T
Pic	a: 0114.+			And the second s	Labor Organization File Number 5093823				
P.O. Box, Bldg., Room No., if any			P.O. Box, Building and Room Number, if any						
Street 1	13125 Langtree D	rive		AND	Street 4100 Bermuda Hundred Road				
City Richmond		City	Chester						
State V	'irginia		ZIP Code + 4	23233	State	Virginia		ZIP Code + 4	23836
, Position	in labor organization.	Local E	resident						
. Held a	appropriate data below in interest in, engaged y value from an emple	in transa	(except as s) ctions (includir se employees	ng loans) with, or ng vour organizat	r derived in	ncome or other econsents or is actively	nomic benefit of seeking to repr	f esent.	interests
. Held an nonetary . Name a Name		in transactoryer who	(except as s) ctions (includir se employees	ng loans) with, or ng vour organizat	r derived in	ncome or other econsents or is actively ure of Interest, Transa	nomic benefit of seeking to repr	f esent.	interests
A. Held annonetary 5. Name a Name Trade Na P.O. Box	an interest in, engaged y value from an empl e and address of Employer ame, if any:	in transactoryer who	(except as s) ctions (includir se employees	ng loans) with, or your organizat	r derived in tion repre	ncome or other econsents or is actively ure of Interest, Transa	nomic benefit of seeking to repr	f esent.	interests
A. Held annonetary 5. Name a Name Trade Na P.O. Box Street	an interest in, engaged y value from an empl e and address of Employer ame, if any:	in transactoryer who	(except as s)	ng loans) with, or your organizat	r derived in tion repre	ncome or other econsents or is actively ure of Interest, Transa	nomic benefit of seeking to repr	f esent.	interests
A. Held amonetary 5. Name a Name Trade Na P.O. Box Street City State	an interest in, engaged y value from an empl e and address of Employer ame, if any:	in transactoryer who	except as signation (except as signation contains	sign of the except of the property of the prop	r derived in tion repre 7.a. Nat N/A 7.b. An gnature of Perjury a niving decu	ncome or other econsents or is actively ure of interest, Transactively ure of interest, Trans	enalties of the lar	f esent.	information
A. Held amonetary 5. Name a Name Trade Na P.O. Box Street City State	an interest in, engaged y value from an employer and address of Employer ame, if any: x, Bldg., Room No., if ar gnature and verification ted in this report (includisigned's knowledge and	in transactoryer who	except as signation (except as signation contains	sign of the except of the property of the prop	r derived in tion repre 7.a. Nat N/A 7.b. An gnature of Perjury a niving decu	ncome or other econsents or is actively ure of interest, Transactively ure of interest, Trans	enalties of the lar	f esent.	information

Name of Person Filing Marshall Aldridge	File Number U- 0322	3			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	NA.				
Street	11.b. Approximate dollar value of such dealing.				
City	12.a. Nature of interest held or income received.				
State ZIP Code + 4	NA				
_	12.b. Amount.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	***************************************			
(including trade name, if any).	Philip Morris paid for a retireme Internation Vice-President T. J.	nt dinner for Warren which I			
Name Philip Morris USA	attended on March 4, 2005.	- Table Vision			
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any P.O. Box 26603					
Street					
City Richmond					
State Virginia ZIP Code + 4 23261					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	\$45			

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A a payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name 3	NA				
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name	NA				
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name Philip Morris USA	Attended a meeting and dinner with Philip Morris Corporate Affairs Department on April 27, 2005.				
Trade Name, if any:					
Equipper country and a state of the state of					
P.O. Box, Bldg., Room No., if any P.O. Box 26603	de la constant de la				
Street	·				
City Richmond					
State Virginia ZIP Code + 4 23261					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$45				

Name	of Person	Filina	Marshall	Aldridge
1101110	01 1 012011	1 2411113	MOTOTIOTS	TTTGT TGGC

File	Number	U-	0.3	22	3
1110	Number	u -	U.S	44	

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A a	and B above) or from any labor relations consultant to an employer any		
payment of money or other thing of value. 13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).	NA		
Name			
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		
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13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).	wh		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).	Philip Morris provided a round of golf and dinner during our annual tobacco industry Presidents and		
Name Philip Morris	Vice-Presidents meeting on June 28, 2005.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., If any P. O. Box 26603			
Street			
City Richmond	- Andrews		
State Virginia ZIP Code + 4 23261			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. \$100		